



U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Aaron Abadi		COURT CASE NUMBER 23cv4033	
DEFENDANT American Airlines Group Inc, et al		TYPE OF PROCESS Summons & Complaint	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Nathalie Simon An employee of Delta in their Customer Care Department Delta Air Lines, Inc.		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1030 Delta Boulevard Atlanta, Ga 30354-1989		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Aaron Abadi 82 Nassau Street Apt. 140 New York, NY 10038		Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):			
Signature of Attorney other Originator requesting service on behalf of: T. Arora		TELEPHONE NUMBER 	DATE 9/5/2023
<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT			
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE			
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 46/67	District of Origin No. 054	District to Serve No. 19
Signature of Authorized USMS Deputy or Clerk 		Date 9/6/2023	
I hereby certify and return that I <input checked="" type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.			
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)			
Name and title of individual served (if not shown above) Alisha Smith (CSC coordinator)		Date 11/14/2023	Time 2:15 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
Address (complete only different than shown above) 2 Sun Ct. NW Suite 400 Norcross, GA 30092		Signature of U.S. Marshal or Deputy  31248	
Costs shown on attached USMS Cost Sheet >>			

REMARKS

42 miles round trip

FILED
U.S. DISTRICT COURT
2023 NOV 22 AM 10:48
S.D. OF N.Y.

PROOF OF SERVICE

Additional information regarding attempted service, etc: